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Mar 02, 1999 8:00 am  
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M24036

1. Corporation Name  
NEW YORK ASSOCIATES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 29259 U.S. 19 N. CLEARWATER FL 33761  
Mailing Address: 29259 U.S. 19 N. CLEARWATER FL 33761

3. Date Incorporated or Qualified: 12/02/1985

2. Principal Place of Business (21-24): 29259 US 19, Clearwater, FL 33761  
2a. Mailing Address (26-29): 29259 US 19, Clearwater, FL 33761

4. FEI Number: 59-2774098  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax:  Yes  No

9. Name and Address of Current Registered Agent: HAYDEN, RICHARD D, 29259 US HWY. 19, CLEARWATER FL 33761

10. Name and Address of New Registered Agent (81-85): Richard D. Hayden, 29259 US HWY 19, Clearwater, FL 33761

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: [Blank]

12. OFFICERS AND DIRECTORS: HAYDEN, RICHARD D, 29259 US HWY. 19, CLEARWATER FL 33761

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (1.1-6.4)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 2-5-99  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)